

# INITIAL EVALUATION *for the* MHSA FULL SERVICE PARTNERSHIP OUTCOMES ASSESSMENT

Performance Outcomes & Quality Improvement

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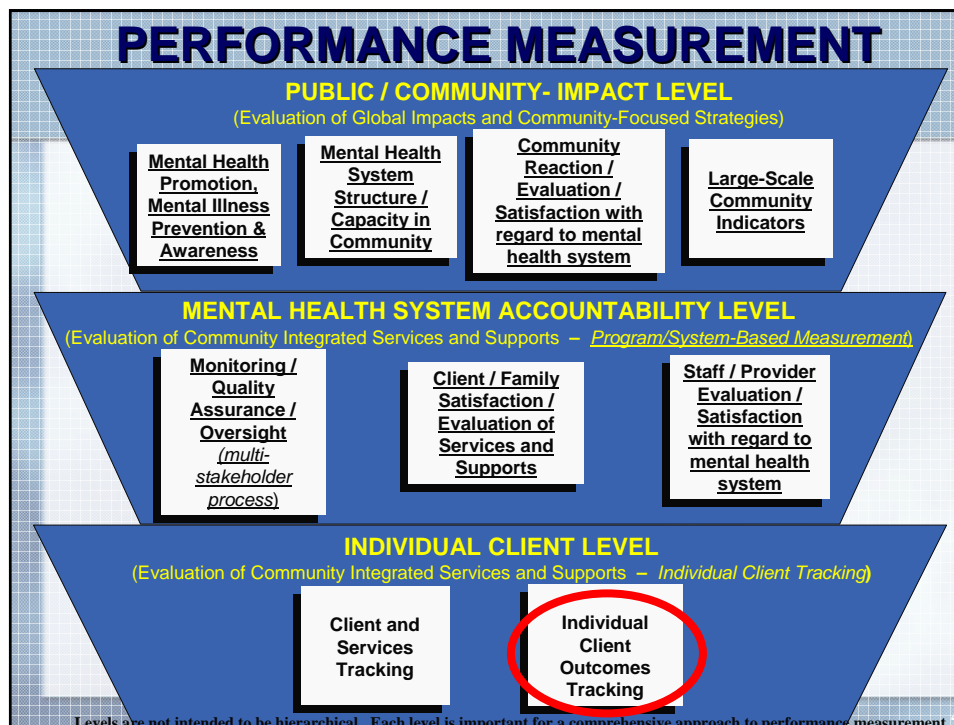
## Training Overview

- Background
  - Context of the Initial Evaluation of Full Service Partners
  - Full Service Partnership (FSP) Target Population
- Full Service Partnership Outcomes Assessment
  - FSP Forms & Methodology
- Data Submission to DMH
  - Options for Submitting FSP Data to DMH
  - Submitting Data to DMH
    - Option 1: On-Line Data Entry
    - Option 2: XML Data Submission
- Getting Your Data Back
- Approver Designees
- County "Certification"
- DMH Staff Contact Information

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# Context of the Initial Evaluation of Full Service Partners

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## Target Population *for the* Initial Evaluation of Full Service Partners

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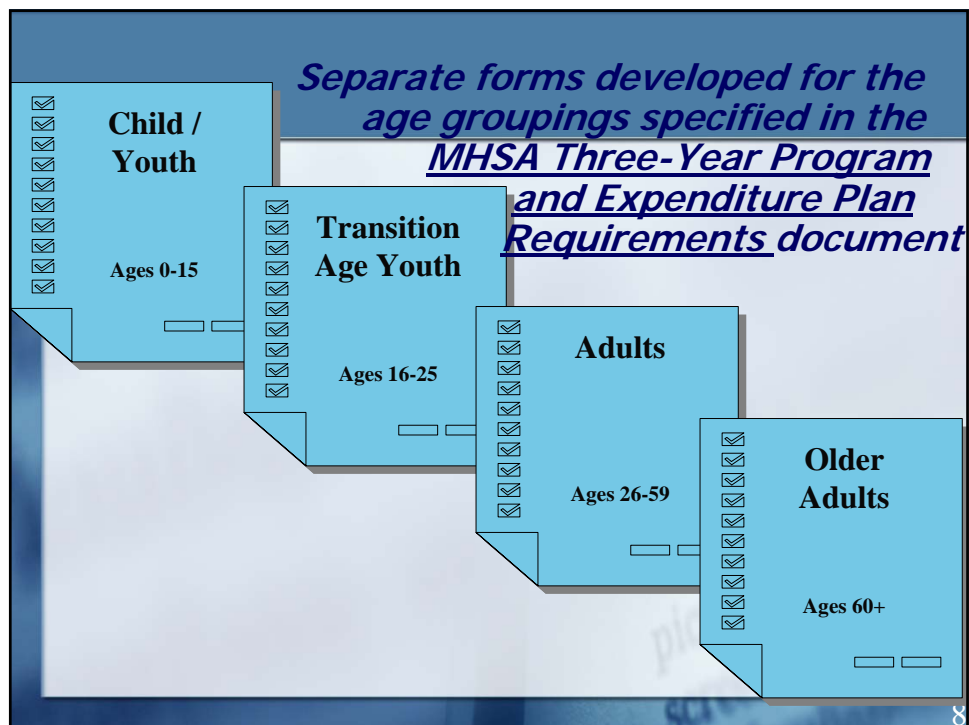
## Data Collection Target Population

- The target population is based on four age groupings
- For further information, please refer to the “Mental Health Services Act Community Services and Supports, Three-Year Program and Expenditure Plan Requirements, Fiscal Years 2005-06, 2006-07, 2007-08.”

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# MHSA Full Service Partnership Forms & Methodology

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## MHSA FULL SERVICE PARTNERSHIP FORMS

The forms will gather:

### History/Baseline data:

**Partnership Assessment Form (PAF) –**

*Completed ONCE, when partnership is established*

### Follow-Up data:

**Key Event Tracking Form (KET) –**

*Completed when change occurs in key areas*

**Quarterly Assessment (3M) –**

*Completed every 3 months*

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## PARTNERSHIP ASSESSMENT FORM

***Completed ONCE, when a partnership is established.***

History and baseline data for the following areas:

- Residential (includes hospitalization & incarceration)
- Education
- Employment
- Sources of Financial Support
- Legal Issues / Designations
- Emergency Intervention
- Health Status
- Substance Abuse
- ADL / IADL - *Older Adults Only*

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## KEY EVENT TRACKING FORM

*Completed every time there is a change in the following key areas:*

- Administrative Information
- Residential (includes hospitalization and incarceration)
- Education
- Employment
- Legal Issues / Designations
- Emergency Intervention

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## QUARTERLY ASSESSMENT FORM

*Completed every 3 months to assess changes in:*

- Education
- Sources of Financial Support
- Legal Issues / Designations
- Health Status
- Substance Abuse
- ADL / IADL – *Older Adults Only*

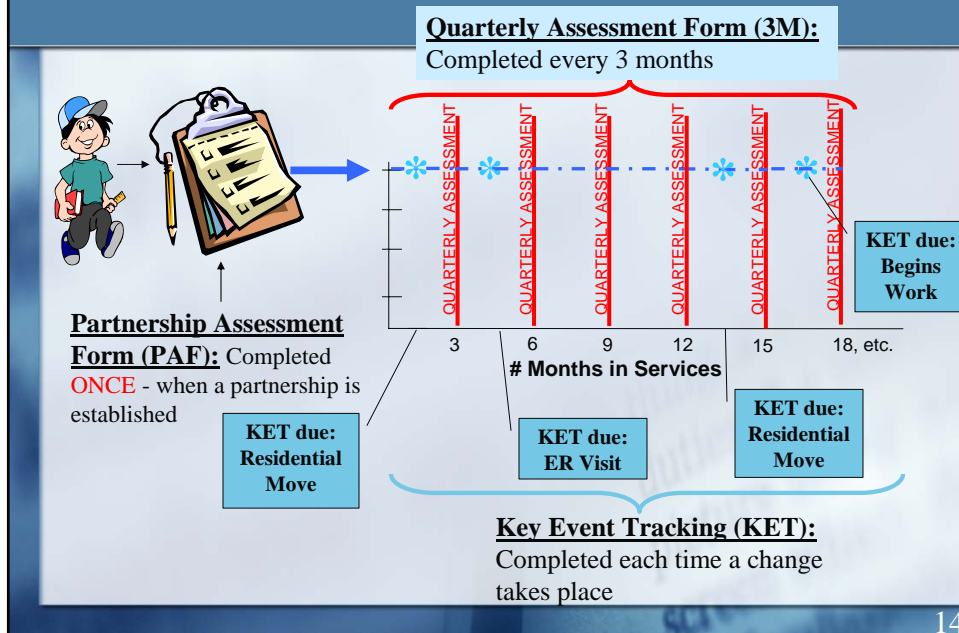
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## Review: FORM DOMAINS

Partnership Assessment Form (PAF)	Key Event Tracking (KET)	Quarterly Assessment (3M)
Administrative Information	Administrative Information	Administrative Information
Residential (includes hospitalization & incarceration)	Residential (includes hospitalization & incarceration)	
Education	Education	Education
Employment	Employment	
Sources of Financial Support		Sources of Financial Support
Legal Issues / Designations	Legal Issues / Designations	Legal Issues / Designations
Emergency Intervention	Emergency Intervention	
Health Status		Health Status
Substance Abuse		Substance Abuse
ADL / IADL - <i>Older Adults Only</i>		ADL / IADL - <i>Older Adults Only</i>

## Timeline: Form Administration



## Recap:

### FORMS AVAILABLE FOR 4 AGE GROUPS:

- Child/Youth (ages 0-15)
- Transition Age Youth (ages 16-25)
- Adults (ages 26-59)
- Older Adults (ages 60+)

### 3 TYPES OF FORMS:

- Partnership Assessment Form
  - *completed ONCE, when the partnership is established*
- Key Event Tracking Form
  - *completed EACH TIME THERE IS A CHANGE in a key event*
- Quarterly Assessment Form
  - *completed EVERY THREE MONTHS, starting from the date the partnership was established*

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## FSP Outcomes Assessments

Partnership Assessment Form



Key Event Tracking



Quarterly Assessment



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## FSP Program ID Codes

- FSP Program ID Codes associate FSP outcomes with the FSP Programs they identify
- It is important to train staff in using the correct Program ID code to ensure that the outcomes associated with the program are accurate
- Each Full Service Partnership program is assigned a four digit, alphanumeric code
- The codes are developed through a collaborative process between County Program and Information Technology staff
- DMH POQI staff act as facilitators for this process by:
  - Providing a list of each county's FSP Programs
  - Gathering information about the nature of the programs to ensure they can be tracked through our system
  - Arranging a conference call between all parties involved in the process

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## Accessing the MHSA Full Service Partnership Outcomes Assessment Forms

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Internet Explorer browser window showing the URL <http://www.dmh.ca.gov/poqi/> in the address bar. The page title is "California Home" and the date is Thursday, March 16, 2006. The page features a "Welcome to California" banner and the "CALIFORNIA DEPARTMENT OF Mental Health" logo. A sidebar on the left lists various links under the "Performance Outcomes System" heading, including "History & Legislation", "System Documents", "Letters", "Reports and Presentations", "Web-Based Data Reporting System", "Training", "Archive", "MHSA Full Service Partnership Evaluation", "Legislation", "Forms", "Data Submission", "Reports and Presentations", "Performance Measurement Advisory Committee (P-MAC)", and "Supportive Housing Initiative Act (SHIA)". A main content area titled "Performance Outcomes and Quality Improvement (POQI): Home Page" contains a paragraph about the POQI unit's mission and a "Subscribe to POQI" button. A yellow callout box with blue text reads: "Go to the DMH Performance Outcomes & Quality Improvement (POQI) Webpage at: [www.dmh.ca.gov/poqi](http://www.dmh.ca.gov/poqi)".

Internet Explorer browser window showing the URL <http://www.dmh.ca.gov/poqi/> in the address bar. The page title is "California Home" and the date is Thursday, March 16, 2006. The page features a "Welcome to California" banner and the "CALIFORNIA DEPARTMENT OF Mental Health" logo. A sidebar on the left lists various links under the "Performance Outcomes System" heading, including "History & Legislation", "System Documents", "Letters", "Reports and Presentations", "Web-Based Data Reporting System", "Training", "Archive", "MHSA Full Service Partnership Evaluation", "Legislation", "Forms", "Data Submission", "Reports and Presentations", "Performance Measurement Advisory Committee (P-MAC)", and "Supportive Housing Initiative Act (SHIA)". A main content area titled "Performance Outcomes and Quality Improvement (POQI): Home Page" contains a paragraph about the POQI unit's mission and a "Subscribe to POQI" button. A yellow callout box with blue text reads: "Under the MHSA Full Service Partnership Evaluation, select > FORMS".

Performance Outcomes and Quality Improvement (POQI): Home Page - Microsoft Internet Explorer

Address: http://www.dmh.ca.gov/POQI/full\_service\_POQI.asp

Wednesday, August 16, 2006

Welcome to **California**

**Performance Outcomes System**

- History & Legislation
- System Documents
- Letters
- Reports and Presentations
- Web-Based Data Reporting System
- Training
- Archive

**MHSA Full Service Partnership Evaluation**

- Legislation
- Forms
- Data Submission
- Reports and Presentations
- Training
- Performance Measurement Advisory Committee (P-MAC)

**Performance Outcomes and Quality Improvement (POQI): Full Service Partnership Outcomes Forms and Web-Based Data Entry**

**NOW AVAILABLE**  
**FULL SERVICE PARTNERSHIP OUTCOMES FORMS AND WEB-BASED DATA ENTRY**

Based on the AB2034 evaluation model, the Performance Measurement Advisory Committee developed initial requirements for measuring individual-level performance outcomes for Full Service Partners (FSPs). For all FSPs identified and served, providers must submit the data captured by these assessment forms. Three types of assessments (i.e., Partnership Assessment Form, Key Event Tracking and Quarterly Assessment) were developed for the age groups specified in the "Mental Health Services Act Community Services and Supports, Three-Year Program and Expenditure Plan Requirements, Fiscal Years 2005-06, 2006-07, 2007-08" document, including children/youth (0-15 years), transition age youth (16-25 years), adults (26-59 years), and older adults (60+ years).

[Click here to download the FSP outcomes forms.](#)  
[Click here to download the Full Service Partnership data elements.](#)

The Partnership Assessment Form (PAF), completed when the partnership is established, captures history and baseline data. The Quarterly Assessment captures the domains that are collected. DMH is currently working with providers on the forms and on web-based data entry.

**Counties/providers must be utilizing these forms. Please contact your local DMH representative for more information.**

**Click on the link to access the forms**

Performance Outcomes System

- History & Legislation
- System Documents
- Letters
- Reports and Presentations
- Web-Based Data Reporting System
- Training
- Archive

**MHSA Full Service Partnership Evaluation**

- Legislation
- Forms
- Data Submission
- Reports and Presentations
- Performance Measurement Advisory Committee (P-MAC)

**Supportive Housing Initiative Act (SHIA)**

- Background & Overview
- Reports
- SHIA On-Line Data Entry System

**Performance Outcomes and Quality Improvement (POQI)**

**FULL SERVICE PARTNERSHIP OUTCOMES FORMS**

To view the following documents you must have [Adobe Acrobat Reader](#).

**Child/Youth (ages 0-15)**

- [Partnership Assessment Form](#)
- [Key Event Tracking](#)
- [Quarterly Assessment](#)

**Transition Age Youth (ages 16-25)**

- [Partnership Assessment Form](#)
- [Key Event Tracking](#)
- [Quarterly Assessment](#)

**Adults (ages 26-59)**

- [Partnership Assessment Form](#)
- [Key Event Tracking](#)
- [Quarterly Assessment](#)

**Older Adults (ages 60+)**

- [Partnership Assessment Form](#)
- [Key Event Tracking](#)
- [Quarterly Assessment](#)

**The forms are separated by each of the 4 age groupings.**

## Options for Submitting FSP Data to DMH

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### *Getting Data to DMH*

#### Option 1: DMH On-Line System

County submits data directly to DMH using a DMH designed on-line, key-entry system. **DMH maintains the data system** and makes all updates.

#### Option 2: Local System Data Reporting

County collects data using their own technology. County submits data via XML (Extensible Markup Language). **County is responsible for maintaining their own data system** and making all updates.

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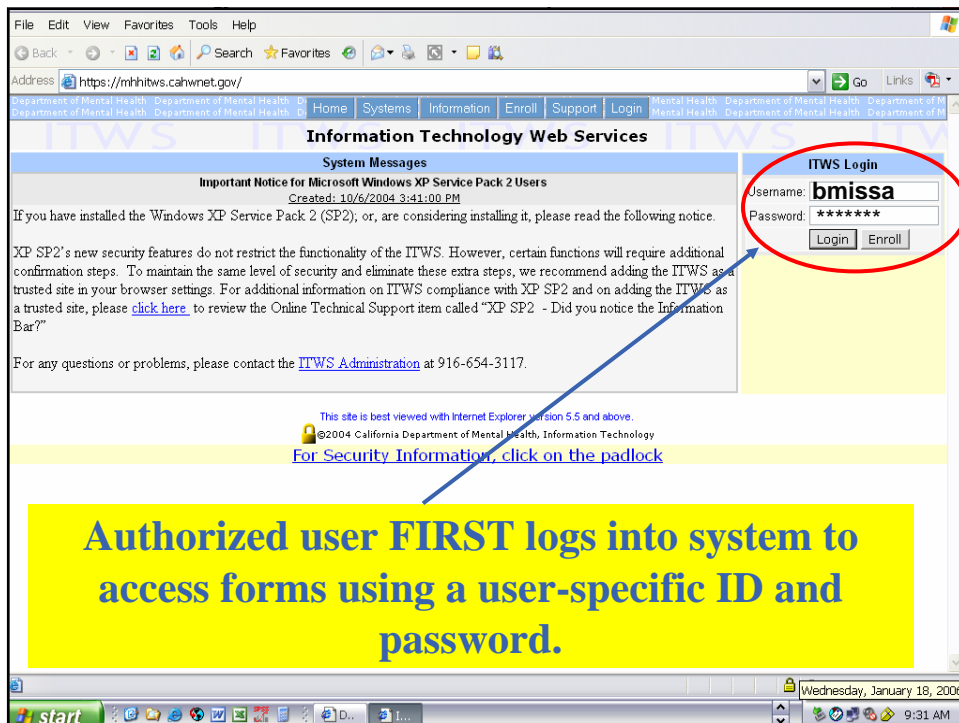
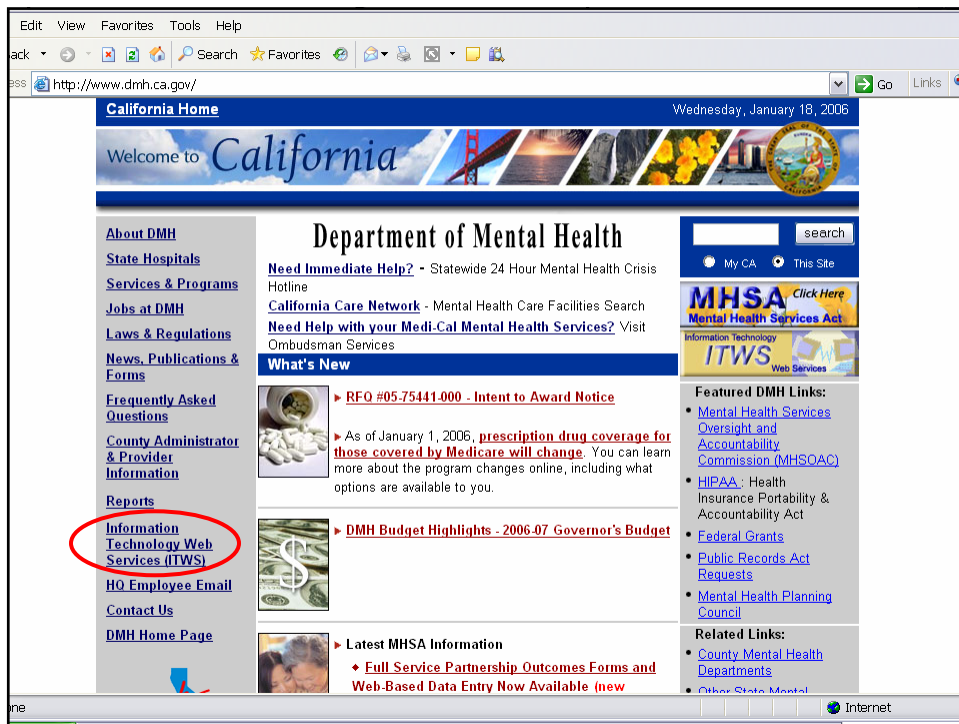
## OPTION 1: DMH On-Line Data Collection & Reporting (DCR) System

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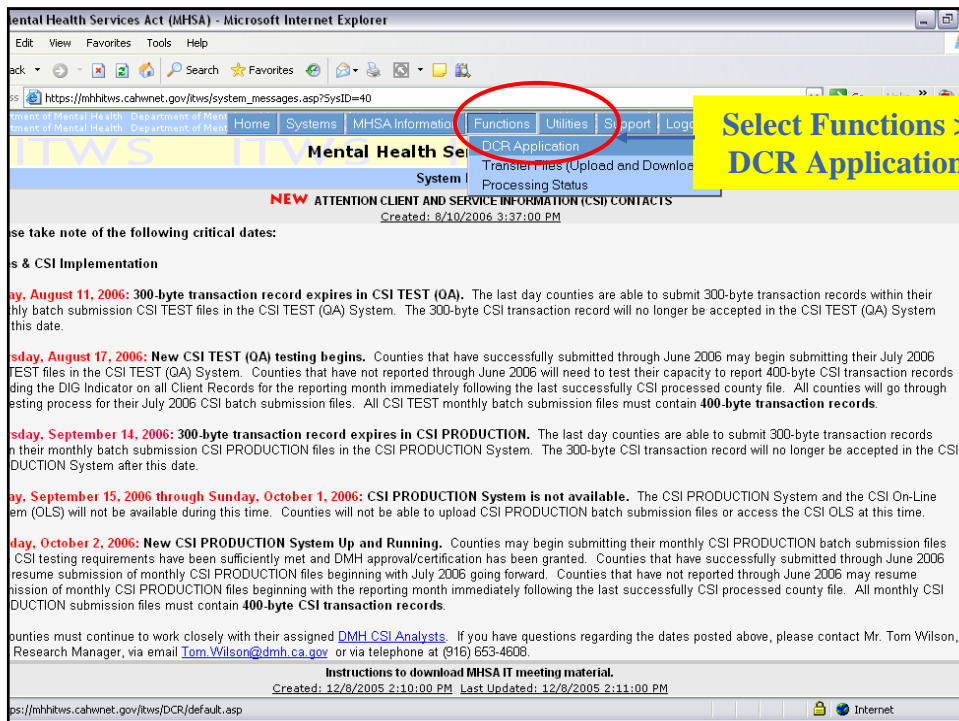
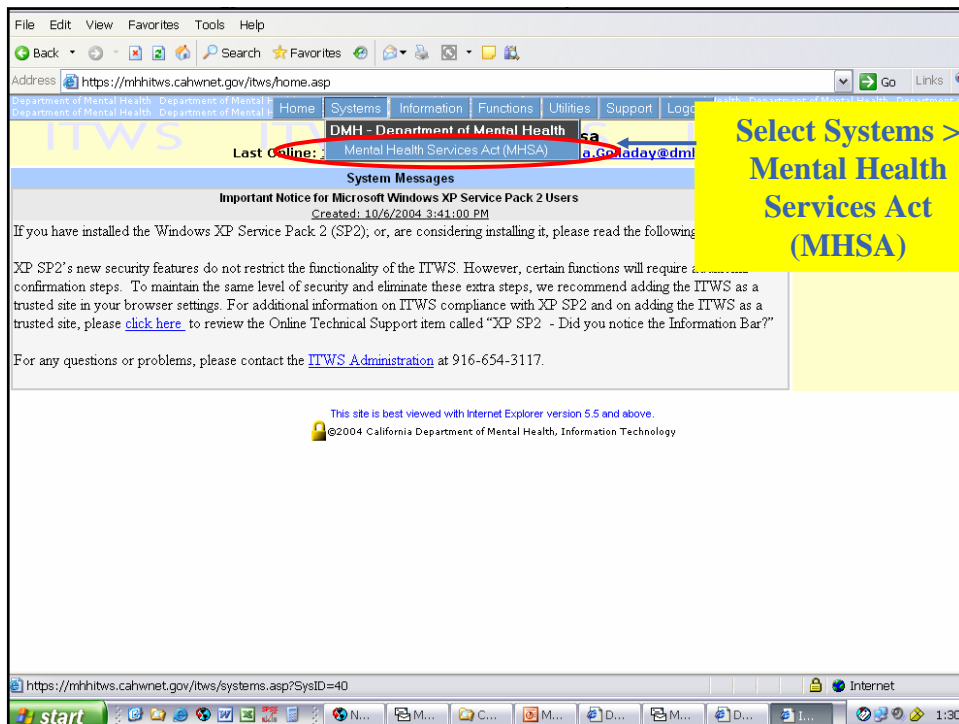
## Option 1: DMH DCR

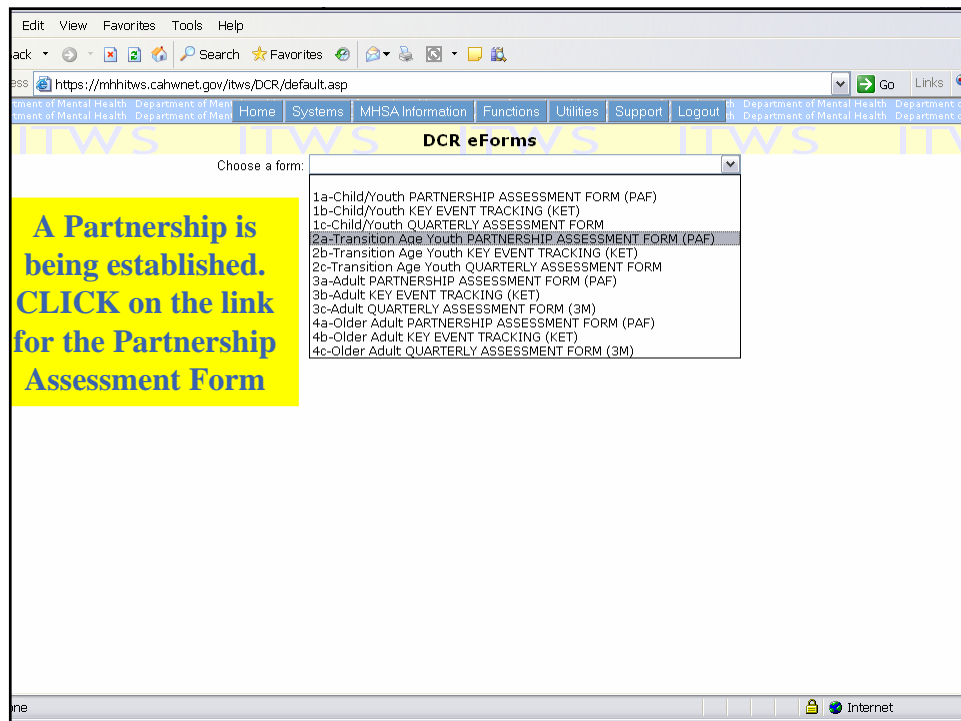
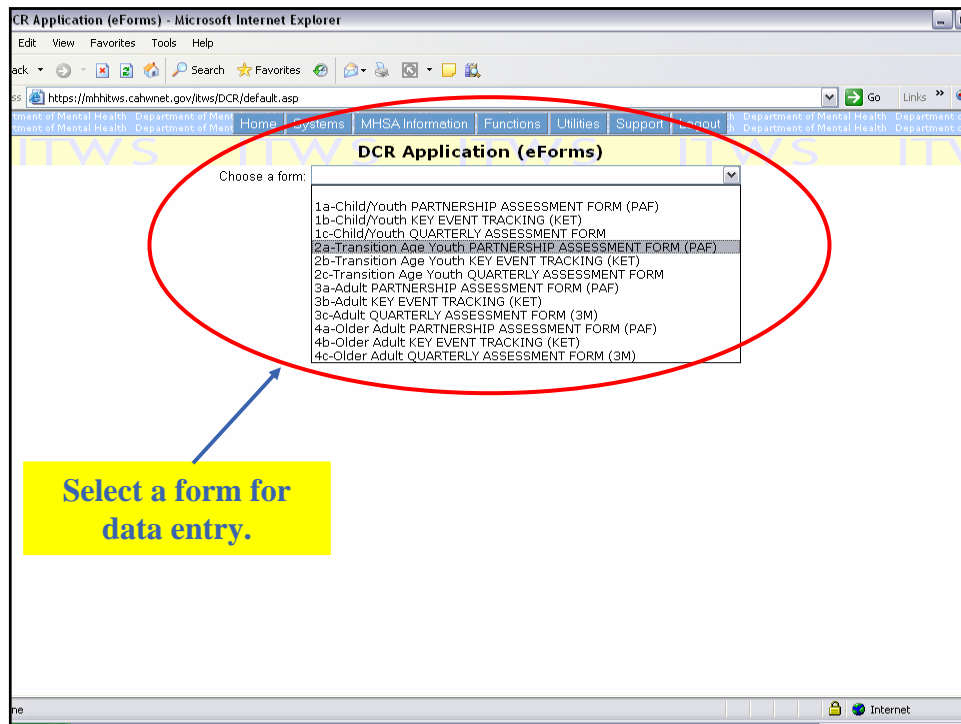
- **Phase 1**: Available January 1, 2006
  - Allows data submission and batched data return
  - Provides basic HTML interface with some error checking and validation functionality
- **Phase 2**: Available Late 2006
  - Allows editing of submitted data
  - Allows query and reporting capability
  - Performs County Client Number verification against CSI data
  - Provides real time data download capability
  - Performs stringent data validations during data entry
  - Provides user friendly interface
  - Allows XML schema based integration
  - Provides "tickler" mechanism to track when reviews/assessments are due

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Back Forward Stop Home

Address: <https://mhinfo.cahwnet.gov/itws/dcr/default.asp> Go Links

Department of Mental Health Department of Mental Health Home Systems MHSA Information Functions Utilities Support Logout Department of Mental Health Department of Mental Health

**DCR Application (eForms)**

Choose a form: 2a-Transition Age Youth PARTNERSHIP ASSESSMENT FORM (PAF)

**CALIFORNIA DEPARTMENT OF Mental Health**

**FULL SERVICE PARTNERSHIP**  
**Transition Age Youth Partnership Assessment Form**  
**FOR AGES 16-25 YEARS**

**TAY PAF 6/2/06**

**PARTNERSHIP INFORMATION**

County Number CSI County Client Number Unique County ID

01 999999999

Youth's First Name Youth's Last Name

John Doe

Partnership Date (mmddyyyy) Youth's Date of Birth (mmddyyyy)

01042006 03281987

Who referred the youth? (mark one)

☐ Self  
☐ Family Member (e.g., parent, guardian, sibling, aunt, uncle, grandparent)  
☐ Significant Other  
☐ Mental Health Facility / Community Agency  
☒ Social Services Agency  
☐ Substance Abuse Treatment Facility / Agency  
☐ Juvenile Hall / Camp / Ranch / California Youth Authority  
☐ Jail / Prison

Done

start

Internet

Edit View Favorites Tools Help

Back Forward Stop Home

Address: <https://mhinfo.cahwnet.gov/itws/dcr/default.asp> Go Links

Department of Mental Health Department of Mental Health Home Systems MHSA Information Functions Utilities Support Logout Department of Mental Health Department of Mental Health

**DCR eForms**

Choose a form: 2a-Transition Age Youth PARTNERSHIP ASSESSMENT FORM (PAF)

County Use Field #1

Medications

County Use Field #2

County Region

County Use Field #3

To be tracked on the QUARTERLY ASSESSMENT form:

County Use Field #1

Self-Help

County Use Field #2

County Use Field #3

**SUBMIT data entered on-line**

**SUBMIT** Reset

Internet

[Back](#)   [Forward](#)   [Home](#)   [Search](#)   [Favorites](#)   [Go](#)   [Links](#)

[https://mhqitws.cahwnet.gov/tws/dcr/default.asp](#)

[Department of Mental Health](#)   [Department of Mental Health](#)   [Department of Mental Health](#)   [Department of Mental Health](#)   [Department of Mental Health](#)   [Department of Mental Health](#)   [Department of Mental Health](#)   [Department of Mental Health](#)   [Department of Mental Health](#)   [Department of Mental Health](#)

[Home](#)   [Systems](#)   [MHSA Information](#)   [Functions](#)   [Utilities](#)   [Support](#)   [Logout](#)

[User Test Area](#)   [\(Return to Prod\)](#)   **DCR eForms**   [User Test Area](#)   [User Test Area](#)

Choose a form: **2a-Transition Age Youth PARTNERSHIP ASSESSMENT FORM (PAF)**

**County Use Field #1**  
 Medications

**County Use Field #2**  
 County Region

**County Use Field #3**

**To be tracked on the QUARTERLY AS**  
**County Use Field #1**  
 Self-Help

**County Use Field #2**

**County Use Field #3**

entry is required in this field. Please enter a value in the "Youth's Last Name" field.

Microsoft Internet Explorer  
 You are about to submit data for county 01  
  

Click "OK"

[Back](#)   [Forward](#)   [Home](#)   [Search](#)   [Favorites](#)   [Go](#)   [Links](#)

[https://mhqitws.cahwnet.gov/tws/dcr/default.asp](#)

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[Home](#)   [Systems](#)   [MHSA Information](#)   [Functions](#)   [Utilities](#)   [Support](#)   [Logout](#)

[User Test Area](#)   [\(Return to Prod\)](#)   **DCR eForms**   [User Test Area](#)   [User Test Area](#)

Choose a form: **2a-Transition Age Youth PARTNERSHIP ASSESSMENT FORM (PAF)**

Thank you for submitting your data!  
 California State Department of Mental Health

[Click here to submit another Transition Age Youth Partnership Assessment form](#)

Created with HTML+Forms  
 Copyright © 1997 - 2002 [Cardiff Software, Inc.](#)

If you want to enter a different form, **CLICK** on drop-down arrow

To continue entering data for the same form type, **CLICK** here

Please enter a valid date in the "Partnership Date (mmddyyyy)" field.

## *PHASE 2: Data Collection and Reporting System (DCR) – Available Late 2006*

### Centralized DCR System Overview:

#### Home Page

- Shows DMH and COUNTY system messages
- Shows 30-Day Key Event Notifications
- Shows quarterly report reminders for FSPs

#### Group FSP Screen

- Shows all FSPs that belong to user's group
- Provides read-only or read-write access depending upon user Role
- Shows quarterly reports that are due for the Active FSPs
- Allows searching by last name or CCN

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### Home Page

Data Collection and Reports - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Search Favorites

Address <https://mhhtws11/kws/dcr2/Default.aspx> Go Links

## Department of Mental Health MHSA Data Collection and Reporting

Traci Fujita  
Sacramento  
Switch roles CSA

Home Partnerships Reports Admin Help

ITWS Home Log out

Search for

Last Name Go

DCR Home

#### System Messages

Message	From	Date
<a href="#">New DCR training</a>	DMH	5/16/2006
<a href="#">State Launches Web Site For People With Mental Illness, Their Families And Service Providers</a>	DMH	5/16/2006
<a href="#">Reminder: All data is due to the State by June 30, 2006</a>	Sacramento	5/1/2006

#### 30 Day Key Event Notification(s)

Partner Name	CSI CCN	County FSP ID	Key Event Date	Total Days	CoordinatorName
<a href="#">Ciccogni, Madonna</a>	858585		6/10/2006	67	Traci Fujita

[View All](#)

#### Quarterly Assessment(s) Due

Partner Name	CSI CCN	County FSP ID	Due Date	Days Past Due	Age	CoordinatorName
<a href="#">Ciccogni, Madonna</a>	858585		8/14/2006	2	30	Traci Fujita
<a href="#">Garcia, Frank</a>	34225478		8/6/2006	10	20	MHSA User1
<a href="#">Lake, Veronica</a>	589		8/6/2006	10	0	Traci Fujita

[View All](#)

Local Intranet

## Group FSP Screen

**Data Collection and Reports - Microsoft Internet Explorer**

Address: [https://mhhtkws11/kws/dcr2\\_FSP/Partnerships.aspx](https://mhhtkws11/kws/dcr2_FSP/Partnerships.aspx)

### Department of Mental Health MHSA Data Collection and Reporting

Traci Fujita  
Sacramento  
Switch roles: CSA

Home Partnerships Reports Admin Help

ITWS Home Log out

Search for:

Last Name

Group FSPs:

#### Full Service Partners

Partner Name	CSLCCN	County FSP ID	Partnership Date	Age	Edit PAF
<a href="#">Abrahamson, Karl</a>	93720387		01/01/2006	20	<a href="#">Edit PAF</a>
<a href="#">Ciccogni, Madonna</a>	858585		05/16/2006	30	<a href="#">Edit PAF</a>
<a href="#">Depp, Johnny</a>	12345		02/01/2006	16	<a href="#">Edit PAF</a>
<a href="#">Garcia, Frank</a>	34225478		05/08/2006	20	<a href="#">Edit PAF</a>
<a href="#">Klein, Calvin</a>	434		02/01/2006	20	<a href="#">Edit PAF</a>
<a href="#">Lake, Veronica</a>	589		05/08/1986	0	<a href="#">Edit PAF</a>
<a href="#">Ramone, Joey</a>	3		05/08/2006	11	<a href="#">Edit PAF</a>
<a href="#">Ramone, Joey</a>	3		08/01/2006	11	<a href="#">Edit PAF</a>
<a href="#">Reznor, Trent</a>	27		05/05/2006	42	<a href="#">Edit PAF</a>
<a href="#">Sinatra, Frank</a>	574		02/01/2006	23	<a href="#">Edit PAF</a>

Click on a partner to see their assessment history

KET Assessment(s): [6/6/2006](#), [8/7/2006](#)

3 Month Assessment(s): [8/6/2006](#)

Done Local intranet

## Add PAF Screen

The system can dynamically generate an assessment form based upon the age of the partner.

**Data Collection and Reports - Microsoft Internet Explorer**

Address: [https://mhhtkws11/kws/dcr2\\_FSP/PAF.aspx](https://mhhtkws11/kws/dcr2_FSP/PAF.aspx)

### Department of Mental Health MHSA Data Collection and Reporting

Traci Fujita  
Sacramento  
Switch roles: CSA

Home Partnerships Reports Admin Help

ITWS Home Log out

Search for:

Last Name

[Add New PAF](#)

Enter Partner's Date of Birth (mm/dd/yyyy):

Enter Assessment Date (mm/dd/yyyy):

Done Local intranet



The system has dynamically generated an assessment form based upon the birth date that was entered. In this case it generated a child form.

**Data Collection and Reports - Microsoft Internet Explorer**

Address: [https://mhhtwst1/twst/dcr2\\_FSP/PAF.aspx](https://mhhtwst1/twst/dcr2_FSP/PAF.aspx)

## Department of Mental Health MHSA Data Collection and Reporting

Traci Fujita  
Sacramento  
Switch roles: CSA

Home Partnerships Reports Admin Help

Search for:   
Last Name

Add New PAF

### FULL SERVICE PARTNERSHIP Child / Youth Partnership Assessment Form FOR AGES 0-15 YEARS

**PARTNERSHIP INFORMATION**

County	Sacramento	
CSI County Client Number	84738293	CSI # did not match our records
County FSP ID	<input type="text"/>	
Partner's First Name	<input type="text"/>	*
Partner's Last Name	<input type="text"/>	*
Partnership Date (mm/dd/yyyy)	8/16/2006	*
Partner's Date of Birth (mm/dd/yyyy)	4/13/1992	*

Who referred the partner? (mark one)

<input type="radio"/> Self	<input type="radio"/> Emergency Room	<input type="radio"/> Homeless Shelter
<input type="radio"/> Family Member (e.g. parent, guardian, sibling, aunt, etc.)	<input type="radio"/> Mental Health Facility / Community Agency	<input type="radio"/> Street Outreach
<input type="radio"/> Significant Other (e.g. boyfriend/girlfriend, spouse, etc.)	<input type="radio"/> Social Services Agency	<input type="radio"/> Juvenile Hall / Camp / Ranch / California Youth Authority
<input type="radio"/> Friend/Neighbor (unrelated other)	<input type="radio"/> Substance Abuse Treatment Facility / Agency	<input type="radio"/> Acute Psychiatric / State Hospital
<input type="radio"/> School	<input type="radio"/> Faith-based Organization	<input type="radio"/> Other

Done

**Data Collection and Reports - Microsoft Internet Explorer**

Address: [https://mhhtwst1/twst/dcr2\\_FSP/PAF.aspx](https://mhhtwst1/twst/dcr2_FSP/PAF.aspx)

### LEGAL ISSUES / DESIGNATIONS

**Justice System Involvement**

**Arrest Information**  
Indicate the number of times the partner was arrested DURING THE PAST 12 MONTHS   
Was the partner arrested anytime PRIOR TO THE PAST 12 MONTHS? ☐ Yes ☐ No

**Probation Information**  
Is the partner CURRENTLY on probation? ☐ Yes ☐ No  
Was the partner on probation DURING THE PAST 12 MONTHS? ☐ Yes ☐ No  
Was the partner on probation anytime PRIOR TO THE PAST 12 MONTHS? ☐ Yes ☐ No

**Parole Information**  
Is the partner CURRENTLY on parole? ☐ Yes ☐ No  
Was the partner on parole DURING THE PAST 12 MONTHS? ☐ Yes ☐ No  
Was the partner on parole anytime PRIOR TO THE PAST 12 MONTHS? ☐ Yes ☐ No

**Conservatorship / Payee Information**

**Conservatorship Information**  
Is the partner CURRENTLY on conservatorship? ☐ Yes ☐ No  
Was the partner on conservatorship DURING THE PAST 12 MONTHS? ☐ Yes ☐ No  
Was the partner on conservatorship anytime PRIOR TO THE PAST 12 MONTHS? ☐ Yes ☐ No

**Payee Information**  
Is the partner CURRENTLY have a payee? ☐ Yes ☐ No  
Did the partner have a payee DURING THE PAST 12 MONTHS? ☐ Yes ☐ No  
Did the partner have a payee anytime PRIOR TO THE PAST 12 MONTHS? ☐ Yes ☐ No

**Dependent (W & I CODE 300 STATUS) Information**

Done

## *Local System Data Reporting*

### **XML Data Submission**

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## *Local System Data Reporting*

- Counties are responsible for ensuring that the most recent version of the DMH XML Schema Definition (XSD) is used to submit data
- Current versions of the XSD can be downloaded by authorized users from the DMH ITWS at <https://mhhitws.cahwnet.gov/>
- Ideally, data collected locally will be submitted to DMH on a nightly basis.
- DMH will work with counties to determine what is feasible.

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## Getting Your Data Back

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## GETTING YOUR DATA BACK

- Periodic download of data from DMH to ITWS
- Data available to authorized users via ITWS
- Data in XML format easily imported into Excel

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## Approver Designees

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## Approver Designees

- 1-2 county staff
- identified by the county Director
- approves requests to access the MHSA data system (either through DCR or through upload/download via XML)
- sets up and maintains user/group access to the Data Collection and Reporting System (DCR)
- determines the user group structure
- assigns roles to enrollees (e.g., partnership service coordinator)
- maintains the user group structure
- updates user accounts to ensure security

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## 5 Steps to Set-up ITWS Security Access to the MHSA Data System

**Step # 1:** County Director designates the Approver Designee(s) with the County Approver Certification form

**Step # 2:** Approver Designee(s) Enroll into the DMH ITWS

**Step # 3:** Creating a Master Group

**Step # 4:** Enrolling Other County Users into the ITWS System

**Step # 5:** Approving Pending Requests for MHSA System Membership

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Once the Approver Designee User accounts have been established, they may then log into the ITWS and begin creating groups and reviewing any pending requests.

Approver Management - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Search Favorites

Address: https://mhhqitws.cahwnet.gov/itws/approvers.asp

Department of Mental Health - Department of Mental Health - Home Systems Information Functions Utilities Support Logout

User Test Area User Test Area User Test Area User Test Area

**Approver Management**

**User Functions**

**Pending Requests (2)**

User	Request Type	Organization	Title	Date Submitted
<a href="#">Shelia Kerr</a>	Pending Enrollment DMH-IT	MHSA Contractor	1/5/2006 9:16:00 AM	
<a href="#">Alice Chen</a>	Pending Enrollment 69 - Test County Research person	4/17/2006 10:05:00 AM		

**Enrolled Users (2)**

Name	Title	Approved
<a href="#">David Garske</a>	Consulting	Apr 14 2006 11:14AM by David Garske
<a href="#">Ken Schallmo</a>	Staff Programmer	Dec 16 2005 9:02AM by Ken Schallmo

**System Functions**

**Groups (3) - Add Group**

Name	Description
<a href="#">Cool Provider</a>	This is the example group.
<a href="#">County 69</a>	This is the county group for test county.
<a href="#">Provider 1234</a>	This is some cool provider

This site is best viewed with Internet Explorer version 5.5 and above.

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## County Certification

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## County Certification Checklist

- ✓ Receive FSP Outcomes Assessment training
- ✓ County staff submit FSP Program ID coding to the Performance Outcomes and Quality Improvement Unit
- ✓ County Director identifies Approver Designees
- ✓ Approver Designees receive training

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## Contacting DMH Staff

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## DMH Performance Outcomes Contacts

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